DISCLOSURE SUMMARY PAGE	<b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
COMMITTEE NAME (Must be same as on Statement of Organization)	For Office Use O	9092
Humboldt County Democratic CARBONAN VITAMIO: 4	Indexed S	
IMPORTANT: Indicate type of committee you are reporting for:	O	
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee (8)Support State of Candidates		
SIGNATURE OF TREASURER (or person filing this report)  TELEPHONE	O/. DATES	13.09
		IGNED
Routine Penalties Due For Late Filed Reports Range from \$	20 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:		
I AM FILING A 10.01.08 - 12.31.08 REPORT FOR ANA (1) ELECTION	/(2)NON-ELECT	ION YEAR
(report date) Indicate of		
☐CHECK IF AMENDMENT TO REPORT DATED Local Co	ommittees, enter D	ate of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  (You must continue to file reports until a Notice of Dissolution is filed.)	& Local Committee lection is held mhold	s, enter County in
STATEMENT OF CASH ON HAND		
CASH ON HAND at the beginning of the reporting period. (This is the total		
of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	210	07.30
ADD TOTAL MONEY TAKEN IN THIS PERIOD	, ,	
Schedule A: Cash Contributions total (Attach Schedule A)		
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
(Schedule H applies to Candidates' Committees Only)	~ ~	10 22
SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B)	32	12.30
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	.72	2 // (/
		3. 7 T
Schedule F: Loan Repayments total (Attach Schedule F)		
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$	247	8.86
UNPAID BILLS (From Schedule D - Attach Schedule D)		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$		
OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$		
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)	_ YES	S NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$		

DR-2

COMMITTEE NAME (Must be same as on Statement of Organization)  HumbolcH County Democratic Committee					
NUMBER AND TH	STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.				
CAUTION: Set	ction 68B.32A(6), Iowa ( rcial purpose by any per	Code, prohibits the use of information copied from reports son other than statutory political committees.	and statements for s	oliciting contribut	ions or
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/30	ID# CK#	Jerry R Haverly 3145 170th St Goldfield IA 50542  Democratic Stew Supper		\$ 100.00	
10/14	ID# CK#	Democratic Stew Supper		1005.00	
	ID#	fund Kaiser		, 000,00	
	CK#				
	ID# CK#				
	ID#				
	CK#				
	ID#	•	-		
	ID#				
	CK#				
	CK#				
	ID#				
	ID#				
	CK#				
			SUB-TOTAL	s	
					00
committee. Relatio marriage) (See Pag	inship must be shown to the	is to disclose the relationship of any relative making a contribution e third degree of consanguinity (blood relatives) and affinity (relati urname of contributor is the same as candidate, but there is n in the relationship column.	n to the ives by no Page	\$ 1/05.	

SCHEDULE Α

(Rev. 06/97)

MONETARY

CHECK THIS BOX IF

RECEIPTS

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN** 

(including candidate's personal funds)

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME	(Must be same a	as on Statement of Organi	ization)	
Humboldt	County	ns on Statement of Organi Democrafic	Committe	e

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	NUMBER			
10/1	OK# 460	Goldfield AccessNetwork 536 N Main St Goldfield, IA 50542	Computer a telephone Service for Demo HQ	s 74.53
10 /16	ID# CK# 461	Fareway 5/2 Summer Ave 701 last Aven Humboldt	Food for Demo stew supper fund raiser	225.02
10/22	ID# 462 CK#	Humbold+ Reminder 512 Summer Ave Humbull+ IA 50548	Advertising for Demo stew supper fund raiser	80.33
11/05	ID# CK# 463	Goldfield Acces Net 536 N Main St Goldfield, IA	Computer & telephone service for Demo HQ	67.96
11/05	ID# СК# 464	Humboldt Reminder 512 Summer Ave Humboldt, IA 50548	Add for Democratic Party in General election	<del>178.8</del> 6
	ID# CK#			285.60
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	\$

TOTAL (if last page of this schedule)

733.44

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

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